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ORIGINAL DEPARTMENT.

COMMUNICATIONS.

REPORT OF SEPTIC POISON AND DEATH.

BY A. M. F. M'COLLOUGH, M.D.,
Of Knightstown, Ind.

Mrs. G., aged 37 years, of lymphatic temperament, has had ten children. Health, previous to last illness, good—this dating back some five or six months, yet only under treatment or medical observation for a period of six or eight weeks. Has been suffering from chronic congestion of liver, complicated with malaria, and attended with a marked degree of icterus, from which the symptoms indicated she was better, and further treatment for same was suspended. On the 2d of May, about four weeks ago, she was confined, and gave birth to a hearty child, which still survives. Her labor was easy and uncomplicated; but little hemorrhage during or after labor—less than usual. She seemed to improve as on former occasions, always being from two to three weeks getting up. By the end of the second week she was able to sit up some; condition of secretions fair; lochia still continuing; lacteal moderately good. Yet she was weak, owing much to the condition brought in previous to labor, in prior sickness. In a few days from this time she was taken with a sense of numbness and pain of lower extremities, followed by an edematous condition. The arms were swollen, with red lines, markedly intense, over the course of lymphatic vessels, causing pain on slightest pressure, then attributed to absorption of some toxic element, either from vitiated condition of system or puerperal

metritis; less likely the latter, since there had been no evidence of inflammatory disorder such as would be noticed by temperature, pulse, or secretions, up to this time. On the 17th or 18th day lochia was checked, leaving no offensive odor or discharge. Under treatment, seemingly improved, edema subsiding very much; arms less tender and painful; general appearance better, and continued so for three or four days; temperature, highest point noticed, $101\frac{1}{2}$ to 102° ; pulse never above 105 to 110; no marked tenderness over abdomen; bowels were moved by use of laxatives. About this time, two days preceding death, she was taken with swooning attacks, two or three per day, simply a form of syncope, being conscious immediately after paroxysm. A consultation, which resulted in no other special developments, was held on the morning of her demise, May 29th. She sat up in bed some time, seemed bright, ate quite heartily about 7.30, and was seen by both physicians at 8 o'clock, who pronounced her better. To the great surprise of all, at 9 o'clock she died. The above facts were obtained from the attending physicians. That evening an autopsy was held, which revealed the following facts: lungs smooth, normal and healthy; liver very much enlarged, weight nine to ten pounds, no adhesions; complete softening of right lobe; structure broken down and much infiltrated with pus; left lobe in similar state of degeneration, yet not so far advanced; gall bladder obliterated, being simply a pulpy mass of softened tissue; spleen enlarged, natural in color, soft and tender in structure; kidneys healthy; condition of bowels good; uterus none too large for the period after confinement (four

weeks), external appearance smooth and natural; no indications of inflammation of same or surrounding tissues; the inner structure of uterus much softened, and in a state of degeneration; mucous lining of posterior surface denuded, that of anterior smooth, yet softened; no evidence of remnant of placenta or retained blood clot therein; heart normal in size and structure, valves healthy; in left auricle was found an autochthonous clot, partially detached, almost organized in its structure, which undoubtedly was the immediate cause of death. The attacks of syncope experienced at times previous to death can justly be attributed to this. After the above facts were elicited, with previous history of the case, the question arose as to the primary cause of septic poison. Some thought it to be purely a case of puerperal metritis, the intensity of poison being first exerted on the congested liver, obstructing the hepatic cells and causing formation of pus, thence further diffusing the toxic element. Others take the view which I think more tenable, that the system had become vitiated prior to labor; judging from the extreme degree of degeneration in the liver, it had existed for a period longer than four weeks; the uterus after labor being in a favorable condition to take on this diseased action, the system underwent a low grade of inflammation, producing the softening and breaking down of tissue. From this the lymphatics absorbed the toxic element, and the blood being brought into a state of hyperinosis, formation of clot was the result, ending in death. The fact of low temperature, the condition of the pulse, and the small degree of constitutional disturbance, were against the idea of purely puerperal metritis.

A PECULIAR LABOR.

BY E. A. COBLEIGH, M.D.,
Of Athens, Tennessee.

I was called, April 10th, 1876, to attend a Mrs. M., in her third labor, as the messenger informed me. She was a lady twenty-four years of age, medium height, average build, ordinary health, and only a resident of the place (in which I was then practicing) for a few months previous to the date of my summons to her bedside. On arrival, found her lying down, already disrobed, but suffering only slight pains. I was told that her previous labors had

been extremely rapid, uncomplicated and easy, and she had, on this occasion, taken to her bed on the first approach of suffering. In addition to the pains so far experienced, there had been a slight "show," first observed two hours before my visit, lasting only a short time, and unaccompanied by any feeling of suffering or discomfort.

But she complained most of an "escape of the water," as she said, describing it as small in quantity and issuing from the vagina slowly. Expecting to find a distended bladder and undilated os uteri, I forthwith made a digital examination. As expected, there was not the least dilatation; but, contrary to my surmises, there was also, at present, a comparatively dry vagina, and a flabby, empty bladder. Whence came the water? Her time, as she claimed, would not be up for about three weeks, and her symptoms, except the pains, were not what she had experienced in her other labors. I therefore continued my examination; found the pains trifling, irregular and non-dilating, the abdomen rather small for a woman of her size, eight months along in gestation, and no positive signs of commencing labor.

However, she described her previous confinements as so remarkably easy and short that, at her own solicitations, I consented to await progress for a while, before leaving. I took dinner at the house, and then, at the end of an hour and a half, finding the pains weaker than at first, and no signs of labor to further detain me, I gave her an opiate and departed, promising to remain near home during the afternoon, where I could be quickly found if further developments indicated a necessity for my presence. My residence was only a short distance from her house.

I heard no more from the case, definitely, until the 27th of the same month, though rumor said that she had not yet been confined. But on the 27th her husband called for me, about 10 o'clock A. M., just as I was preparing to answer a rather urgent call to go into the country. From him I learned that she had been up, attending to household duties, ever since the day following my last visit. She had almost daily felt slight abdominal pains, with an occasional small "show" at the vulva. But besides this, she had continual dribbling of urine, burning and pain at neck of bladder, and rectal tenesmus, with, however, normal micturition at times.

Found patient resting quite easy, and in the absence of pain proceeded to examine the condition of her uterus. She said her pains were regular and hard, with long intermissions, but not bearing down in character, and there had been no escape of the waters. The bladder and rectum were empty, head presentation easily distinguishable through a fully distended os, passages rather dry but normally distensible, head lying low, and membranes apparently intact. Ruptured the membranes, pains came on, and at the third pain the delivery of child and placenta was accomplished, with no signs of liquor amnii, and no complications. The child, a healthy girl, weighed eight and a half pounds, and cried lustily. There was no more hemorrhage than is usual, the delivery was complete, and the mother doing finely, with almost no prostration, and no delay on account of the absence of amniotic fluid. I applied the binder, and, contrary to my habit, immediately left my patient, to attend the other case, then waiting my coming.

Woman and child both thrived well, the former leaving her bed (on her own responsibility, however) seven days after confinement, and resuming the supervision of household affairs. It was the most rapid labor, with one exception, that I ever witnessed, and the easiest, without exception. Comments are unnecessary.

HOSPITAL REPORTS.

NERVOUS INFIRMARY.

CLINIC OF S. WEIR MITCHELL, M. D., APRIL 6TH, 1877.

Reported for the MEDICAL AND SURGICAL REPORTER, by C. C. VANDERBECK, M.D., PH.D.

Interesting Case of Nervous Exhaustion.

CASE 20.—Mr. B.; is a professional pedestrian, once the champion of America, and is a man of medium size; an Englishman by birth; thirty-six years of age, and has been engaged in the "walking profession" for sixteen years. He states that he was educated for a lawyer, but, discovering in early life that he had great powers of endurance, decided to become a professional pedestrian. He has challenged all the professionals of the world, Weston included, and has been successful each time. He has often walked for one hundred and thirty six consecutive hours,

taking a rest of only fifteen minutes each twenty-four. He has been married for three years; has no children. His build is wiry; his temperament bordering on the sanguineous; his constitution naturally good, being a descendant of a healthy and long-lived stock.

Family History.—Both his parents are English and were perfectly healthy, and died in extreme old age. There were eleven children, he being the youngest. The family was healthy throughout. He came to this country seventeen years ago.

History of Present Attack.—His last walking feat occurred in December, January, 1876, 1877, walking fifty miles in ten hours. He accomplished the feat easier than ever before, yet he became very weak after this walk. He thinks his system was running down before, and that this last match was the straw that tested his powers beyond endurance. For two weeks he felt comparatively well, then for two weeks he was only able to get about with difficulty, and since that time he has been abed. He has lost in weight greatly; he ought to weigh 138 to 142 pounds, but has lost 26 pounds in six weeks and become very anemic. He always lost weight during his engagements, losing once, in a week's tramp, 13 pounds.

Two weeks after the last walk he lost his voice, speaking only in a whisper, and this continued for nine weeks. There was no soreness of the throat, no diphtheria. He complains of intense headaches, especially marked at the back of the head and down the neck. This occurs at irregular intervals; no vertigo. He is very unsteady on his feet, and all his movements, even when lying in bed, seem to be unsteady and uncertain. His voice at the present time is weak and tremulous; eyesight good; faint systolic basic murmur of the heart. After eating he has oppression and sense of weight, and is troubled considerably with night sweats. While in the infirmary he has not had a temperature over 99 $\frac{1}{2}$, and Dr. Cadwalader states that he has not had marked fever at any time, neither has he had diarrhoea nor skin eruptions. Of course, such a case is open to the suspicion of being a walking typhoid, and the schedule of symptoms supplied is too incomplete to make us positively sure one way or the other, but the very want of symptoms, the utter loss of voice without inflammatory conditions, with the speedy recovery, would lead me rather to class it with other forms of trouble.

Cases like this one are, I fancy, very rare. They do not present themselves usually among athletes, because of the original strength and endurance, the exceptional amount of which lead the man into pursuits like our patient's. Such persons are strong to begin with, and train with great care, so that instances of excessive exhaustion are rare among them. To find them, we must come into contact with the feebler members of masses of men subjected to long and severe trials of physical power and endurance. Such an opportunity was given in our late civil war, when enormous

numbers of men were submitted at times to the ordeal of insufficient diet, trying weather and incessant marching. Under this treatment a small percentage broke down, and at last gave out entirely, unable to march a step further. Many such cases reached, at last, the United States Army Hospital for Diseases of the Nervous System, where they were sent as paralyzed. Paralyzed they were not, unless the utmost extreme of exhaustion be paralysis. I do not remember to have seen such cases elsewhere, but the present case recalls them forcibly to my mind. The history they presented was in some respects analogous, not identical. This man did not show signs of exhaustion until some time after his walk was over, and he then rapidly passed to the extreme of feebleness, with loss of voice, a state in which he was ably treated by his attendant physician, Dr. Cadwalader, who finally brought him to my clinic for advice.

In the cases furnished by war, marching was kept up until they failed, and could go no further. In some cases the motive to walk until they actually dropped was the presence of a pursuing enemy. It might be supposed that in such cases immediate rest would suffice for relief and cure, and in many it did, but in a few the exhaustion increased after exertion was over, and a state of paresis was attained, the like of which can rarely be seen in civil life; certainly, hardly ever in men at least, and rarely even in overworked anaemic women.

Our war patients got readily well on rest in bed, beer, and full diet, with strychnia.

The present case will be put at absolute rest, be massaged once a day, fed every two hours, and take malt liquor moderately. As to drugs, I shall give him only iron, and not the subcarbonate of the U. S. Pharmacopeia, which we usually employ, but the dialyzed iron—a neutral solution of the peroxide, with which I have been experimenting largely of late. It is commonly given in doses of thirty or forty drops a day, which would be a small dose, as the solution contains twenty four grains to the ounce. I use it, however, as I use most iron preparations, in far larger doses, and have given it freely by the drachm or the half-ounce, without its causing annoyance. The preparation is certainly tolerated well by some people who do not bear other forms of iron, and as it does not blacken the teeth, or in any way affect the bowels, I have been altogether pleased with it. Its freedom from unpleasant taste is also no mean advantage. The foreign forms of dialyzed iron are sometimes objectionable, both on account of their price, their taste and the uncertainty of their quality. These objections do not apply to the admirable specimens of the drug as it is now made, on a large scale, by John Wyeth & Bro., of this city.

—The Parisians, during 1876, ate 9271 horses, asses and mules; an increase over 1875 of nearly three thousand.

MEDICAL SOCIETIES.

PENNSYLVANIA MEDICAL SOCIETY.

The Medical Society of the State of Pennsylvania met at Harrisburg, Wednesday, June 13th, in the Capitol, and was called to order by the President, Dr. R. B. Mowry, Allegheny, at 3 p. m.

Dr. Curwen, Chairman of the Committee of Arrangements, introduced Rev. William A. West, of Westminster Church, who opened the session with prayer.

Dr. John Curwen then delivered an address of welcome, after which he reported the programme, as follows:—

Wednesday, commence at 3 p. m., adjourn at 6 p. m. Evening, reception by Dr. G. W. Reilly.

Thursday, commence at 9 a. m., adjourn at 12 m. Afternoon, commence at 3 p. m., adjourn at 6 p. m. Evening, reception by His Excellency, Governor John F. Hartranft, after which the Dauphin County Medical Society invited the Society to a banquet at the Bolton House.

Friday, commence at 9 a. m. At 11 a. m. the Society to be entertained at the Insane Hospital, by Dr. John Curwen.

On motion, the programme was adopted.

On motion, the clergy of the city were invited to seats with the Society.

The Permanent Secretary then read the names of the duly registered delegates, etc. The entire number registered was one hundred and eighty-four.

On motion of Dr. J. G. Stetler, Philadelphia, all the members of the Dauphin County Medical Society not delegates or permanent members, were invited to seats.

The Vice-President, Dr. G. W. Reilly, Harrisburg, having taken the chair, the President delivered the annual address.

On motion of Dr. Turnbull, Philadelphia, thanks were tendered Dr. Mowry for his interesting and learned address, and a copy was requested for publication.

On motion, Drs. H. S. Wishart and J. T. Rothrock were invited to seats.

Dr. Curwen read an appeal relative to the insane poor, and presented a memorial, as prepared by the committee appointed. It was ordered to be published with the Transactions.

He offered the following resolution, which was adopted:—

Resolved, That a committee of seven be appointed by the President of this Society, who shall exercise a cautious and watchful care over all matters pertaining to the general welfare of the insane, and diffuse such information as may be needed to secure that object in the most judicious manner.

The President appointed as the Committee on Dr. Curwen's resolution—Dr. Curwen; Traill Green, Easton; J. A. Reed, Dixmont; S. G. Lane, Chambersburg; A. H. Detwiler, Williamsport; Thomas S. Kirkbride, Philadelphia, and S. S. Schultz, Danville.

Dr. T. Green, Chairman of the Standing Committee, reported a paper from Dr. P. D. Keyser, Philadelphia, and on motion he was granted permission to read it.

On motion of Dr. Stetler, it was agreed that the delegates should meet immediately after adjournment, to select their members of the Committee on Nominations.

The Report of the Committee on Medical Education, Dr. A. M. Pollock Chairman, was read by the Permanent Secretary.

To the Medical Society of the State of Pennsylvania :—Your Committee, to whom was referred the resolution of Dr. A. M. Pollock, offered at the meeting, May—June, 1876, would respectfully recommend its adoption, with the following modification:—

Resolved, That all county medical societies now existing under the regulations of this Society, or which may hereafter be so organized, shall—at the next meeting to elect officers following the adoption of this resolution, or at the election of officers when such society shall have been organized, and annually thereafter—be required to elect three members, to be called medical examiners, whose duty it shall be to examine all applicants for admission as students of medicine under the tuition of members of the society; and said Committee shall withhold their certificate from any applicant, unless he be of good moral character, possess a good English education, and a sufficient knowledge of Greek and Latin to enable him to pursue his studies with advantage. And no member of any county society shall receive any person as a student of medicine, unless he presents a favorable certificate from this committee.

Your Committee would also recommend the adoption of the following resolutions, viz:—

Resolved, That every member of a county society organized, or which may hereafter be organized, under the regulations of the Medical Society of the State of Pennsylvania, before receiving any person as a student of medicine, shall require him to enter into a contract to pursue his studies for a period of not less than three years; and it shall be the duty of his preceptor to present him a certificate countersigned by the secretary of the local society of which he is a member, setting forth the facts as above stated.

Resolved, That it shall be the duty of all members of the profession holding allegiance to the Medical Society of the State of Pennsylvania, to recommend their students to attend only such medical colleges as rigidly enforce the full three years' course of study in their curriculum, and otherwise conduce to elevate the standard of graduation.

Your committee deem it needless to offer an apology for calling attention to the hackneyed subject of medical education. It is only necessary to refer to the literature on the subject for the past twenty or thirty years, in the transactions of our medical organizations, to convince us that it is considered a matter of the greatest importance. And while we are willing to

acknowledge that our progress has been slow, yet we are not of those who think that nothing has been accomplished. We believe that every paper that has been written, and every debate on this important subject, has made an impression—like the drop of water on the rock, slow, to be sure, but if persistently continued, will overcome all obstacles.

It certainly does not follow, that because we cannot accomplish as much as could be desired in a given time, we should give up in despair! For this reason we propose to keep the stream flowing, and expect, by proper guidance, to see it at last reach the hoped-for goal.

In the discussions on the subject of improving the standard of medical education, our attention has been directed too much to the public teacher. Now let us commence at the root of the evil, by requiring the private instructor to present better material to the medical institutions, and then hold these to a full responsibility for a faithful performance of their duty.

A. M. POLLOCK, *Chairman*.

On motion the report was accepted and referred to the Committee of Publication, and its consideration was made the special order for the second day of the session of 1878.

Dr. Keyser then read his paper “On, Some Forms of Inflammatory Diseases of the Eye being Caused by Defects in Refraction and Accommodation.” It was referred to the Committee of Publication.

Dr. R. A. Sibbitt, Chairman, read the report of the Committee on Medical Legislation.

MR. PRESIDENT:—The Committee on Medical Legislation respectfully report that a bill, substantially the same as that suggested in the Transactions of last year, was introduced into our Legislature, and, after undergoing modifications in both Houses, was passed, and has become a law of the State.

It fixes a standard of qualifications in the profession; it requires all persons who commence the practice to have the degree of *Doctor of Medicine*; it permits resident practitioners, who have been in practice five years, to continue without the degree; it requires registration by the prothonotaries of the several counties; it requires itinerant practitioners to pay a license of \$50 to the county; and it imposes a fine of \$200 on all who violate its provisions.

We may state further, that it recognizes the faculties of our chartered medical schools as the proper persons to conduct examinations and to issue diplomas. At the same time, it places the responsibility of a well-educated profession in the future upon these institutions—a most important feature of the law. May we not, therefore, in view of this fact, anticipate the time when the degree of Bachelor of Arts, or its equivalent, will be required, before the degree of Doctor of Medicine is conferred.

With regard to registration, your Committee desire to make a few remarks. Its advantages to the profession and to the people ought to be apparent; and yet we fear that the subject is

not well understood, either by the profession or by our legislators. The want of perspicuity in Section 3 of the present Act is sufficient evidence of this, and it may become necessary to prepare a memorial next year, setting forth the advantages of full registration, and to ask for the passage of a supplement to this section.

The objects aimed at should be the elevation of the profession and the public good; and to secure these, registration should be *uniform* and *impartial*. Moreover, it should be required under *oath* or *affirmation*. The responsible relations of the profession to the people fully warrant these conditions, and no honorable practitioner should object to them. In European countries registration is imperative; it forms the basis of all legislative enactments which concern the profession; and, indeed, it is impossible to see how a noble profession can be sustained in any country without it.

Registration, such as we advocate, would show how many practitioners of medicine there are in our State, and in each county, town, and city. It would show how many have obtained the degree of Doctor of Medicine; how many have obtained it from institutions in our own State; how many from institutions in neighboring States; and how many from institutions in foreign countries. It would also show how many are engaged in the practice of medicine without this degree, and many other facts useful to the profession and to the people.

For the sake, therefore, of uniformity in the records required to be made by the several prothonotaries throughout the State, and for the purpose of securing to the profession and to the people the advantages of thorough registration, your Committee would recommend:—

1. That a Record Book of convenient size be procured by each prothonotary, with an index attached to the first pages, and numbers to all the other pages.

2. That immediately after the index pages the following forms of registration for the guidance of the prothonotary and those who register, be printed or written on a separate page:—

FIRST FORM OF REGISTRATION.

STATE OF PENNSYLVANIA, — county, ss.

Before me, —, Prothonotary of the county and State aforesaid, personally appeared —, who, being duly —, according to law, deposes and says:—

My name is —, I am a native of (name the country). I obtained, in a regular manner, in the year —, the degree of Doctor of Medicine from —, an institution duly authorized to confer upon its alumni this degree. I also obtained (here insert all the degrees, or the same degree from another institution).

(Deponent signs.)

Sworn and subscribed
before me, the —
day of —, A. D.,

—.
A. B., Prothonotary.

SECOND FORM OF REGISTRATION.

STATE OF PENNSYLVANIA, — county, ss.

Before me, —, Prothonotary of the county and State aforesaid, personally appeared —, who, being duly —, according to law, deposes and says:—

My name is —, I am a native of (name the country). I have been in the continuous practice of medicine in the State of Pennsylvania, in (name the place or places), during a period of — years. (Deponent signs)

Sworn and subscribed
before me, the —
day of —, A. D.,

A. B., Prothonotary.

In conclusion, your Committee would recommend that the leading members of the profession encourage the prothonotaries of the several counties (who are well paid for their work) to procure the books immediately, and to carry out registration as herein indicated.

R. L. SIBBETT, M.D., Chairman.

On motion of Dr. Green, it was adopted, and the committee continued.

On motion of Dr. A. H. Halberstadt, of Pottsville, it was

Resolved, That this Association commends most highly the adoption of the three years' graded course of medical instruction by medical colleges, and hereby pledges its support to institutions adopting such method.

On motion of Dr. Curwen, Dr. B. Lee, of Philadelphia, was granted permission to read a paper on "Diagnosis of Psoriasis Abscess."

Dr. Lee read his paper, and on motion, it was referred to the Committee of Publication.

Dr. Curwen then, on behalf of the Committee of Arrangements, announced the order for the morning.

On motion, the Society adjourned to meet at 9 A. M., on Thursday.

THURSDAY, JUNE 14TH.

The Society met at 9 A. M.

The following was announced as the Committee on Nominations:—

Adams county, R. B. Elderdice; Allegheny, James McCann; Beaver, T. J. McKinney; Bedford, J. N. Richards; Blair, R. Clark; Berks, L. H. Cooper; Butler, C. E. Peck; Centre, T. R. Hayes; Chester, G. R. Spratt; Clarion, J. N. Beck; Clearfield, J. A. Bouse; Columbia, L. B. Kline; Cumberland, W. W. Dale; Dauphin, L. H. Lenher; Franklin, J. Montgomery; Huntingdon, D. P. Miller; Indiana, S. R. Rutledge; Lancaster, J. H. Mayer; Luzerne, H. J. Jones; Lycoming, T. H. Helsby; Mercer, E. Griswold; Mifflin, A. Rothrock; Montour, J. D. Strawbridge; Northampton, D. Engelman; Northumberland, L. H. Stoner; Perry, M. B. Strickler; Philadelphia, O. H. Allis; Schuylkill, A. H. Halberstadt; Tioga, G. D. Crandall; Westmoreland,

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Medical Societies.

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J. J. McCormick; Washington, J. H. Leyda; York, J. M. Shearer.

The Committee of Arrangements made announcements of papers to be read in order, at the morning and afternoon sessions.

Dr. John Curwen, having read the address on Mental Disorders, on motion, it was referred to the Committee of Publication.

Dr. Curwen introduced Drs. Larison and Lilly, representatives from New Jersey. Dr. Larison made a few remarks.

Dr. H. Lenox Hodge, of Philadelphia, read the address on Surgery, showing the recent advances, and exhibiting a variety of apparatus, etc.

On motion, the thanks of the Society were tendered to Dr. Hodge for his paper, and it was referred to the Committee of Publication.

On motion of Dr. J. G. Stetler, of Philadelphia, the members were requested to meet at the Capitol at 8 p. m., to go in a body to the Executive Mansion.

Dr. O. H. Allis, of Philadelphia, made some remarks on injuries of the elbow joint, illustrating the subject with diagrams. On motion, he was requested to prepare them to be submitted to the Committee of Publication.

Dr. Samuel W. Gross, of Philadelphia, read a paper on Stricture of the Urethra caused by Masturbation, illustrating it by the details of a large number of cases. The paper was referred for publication.

Dr. John H. Packard, of Philadelphia, made some remarks on perineal fistula treated by elastic ligature, illustrated by diagrams on the blackboard. He was requested to prepare his remarks for publication.

The Permanent Secretary read the report of the Nominating Committee.

OFFICERS FOR 1878.

President—Dr. D. Hayes Agnew, Philadelphia.

Vice Presidents—Dr. A. Rothrock, Lewis-ton; Dr. J. D. Strawbridge, Danville; Dr. R. Hays, Bellefonte; Dr. L. Turnbull, Philadelphia.

Permanent Secretary—Dr. Wm. B. Atkinson, Philadelphia.

Recording Secretary—Dr. Henry T. Coffey, Pittsburg.

Corresponding Secretary—Dr. Wm. Goodell, Philadelphia.

Treasurer—Dr. Benjamin Lee, Philadelphia.

Committee of Publication—William B. Atkinson, Benjamin Lee, William Goodell, O. H. Allis, J. G. Stetler and James Tyson, Philadelphia, and H. T. Coffey, Pittsburg.

Delegates to American Medical Association—O. H. Allis and S. W. Gross, Philadelphia; L. H. Cooper, Berks; D. P. Miller, Huntingdon; John Curwen, Dauphin; A. H. Halberstadt, Schuylkill; Joseph Swartz, Perry; J. H. Leyda, Washington; S. R. Rutledge, Indiana; G. L. Humphreys, Westmoreland; Rowan Clarke, Blair; G. D. Crandall, Tioga; H. J. Jones, Luzerne; J. F. Dunlap, Lancaster;

Isaac Purcell, Montour; James M'Cann, Allegheny.

Delegates to New Jersey Medical Society—L. Turnbull, of Philadelphia; J. F. Treichler, and J. T. Carpenter, of Schuylkill.

Delegates to New York State Medical Society—J. G. Richardson, John H. Packard, Philadelphia; H. L. Orth, Dauphin; A. H. Shaffer, Mifflin; Charles Burr, Luzerne.

Delegates to Ohio State Medical Society—David M'Kinley, Beaver; J. A. Bouse, Clearfield; E. H. Horner, Northumberland.

Delegates to Delaware Medical Society—W. W. Dale, Cumberland; R. J. Levis, Philadelphia; J. M. Gammell, Blair; R. B. Elderdice, Adams.

Delegates to West Virginia Medical Society—G. W. Burntheisel, Lancaster; E. A. Wood, Allegheny; D. S. Griffith, Bedford.

Delegates to Medical and Chirurgical Faculty of Maryland—C. W. Krise, Cumberland; Charles E. Quail, Schuylkill; J. Montgomery, Franklin; W. C. O'Neil, Adams; W. B. Stoner, Northumberland; G. R. Spratt, Chester; J. E. Bulkeley, Luzerne.

Delegate to Connecticut State Medical Society—A. H. Halberstadt, Schuylkill.

Delegate to Massachusetts State Medical Society—E. Griswold, Mercer.

The Committee fixed the time and place of next meeting at Pittsburg, on the last Wednesday in May, 1878.

The members of the Allegheny Medical Society are authorized to appoint the Committee of Arrangements for 1878.

On motion of Dr. Nebinger, the report was received and approved.

The Censors to remain as last year, except the filling of a few vacancies.

On motion, adjourned to meet at 3 p. m.

AFTERNOON SESSION.

The Society was called to order by the President, at 3 p. m.

Dr. Hugh Hamilton, of Harrisburg, read a paper on the metric system.

On motion, it was referred to the Committee of Publication, with thanks for this illustration.

The President then invited Judge Sterrett to a seat on the platform.

Dr. Benjamin Lee, Philadelphia, read the address on Hygiene.

On motion of Dr. W. L. Atlee, Philadelphia, it was received and referred to the Committee of Publication.

The Permanent Secretary read the following, which was received, and the committee continued:

The Committee appointed at the session of 1875 to urge upon the State legislature the importance and necessity of creating a State board of health, reported that they have taken occasion, both by letter and by personal interviews with influential members of the Legislature, and by furnishing editorial articles to prominent daily journals, to advance the interests of this important measure. They are glad to

be able to state that, although bills proposed at the last two sessions failed to become a law, that proposed at the last session passed the Senate, and failed to pass the House by a small majority. The Committee take occasion to urge upon the individual members of the Society the necessity of using their personal influence upon those with whom they come in daily contact, in creating a healthy public sentiment in favor of hygienic legislation.

Signed, WILLIAM B. ATKINSON,
H. L. ORTH,
BENJAMIN LEE.

On motion of Dr. Allis, it was agreed that it is deemed advisable to recommend to the county societies that measures be taken looking toward the adoption of the metric system.

On motion of Dr. J. G. Stetler, Pennsylvania, it was

Resolved, That the importance and necessity of a State board of health be submitted to the various county medical societies, for their action, with the request for their early consideration, and if approved the members thereof are hereby earnestly requested to use their influence with the members of the Legislature for the enactment of a law for the above object.

Resolved, That the Censors, where no county medical societies exist, are hereby respectfully requested, if they approve of such law, to urge such legislation upon their respective members of the Legislature.

On motion of Dr. A. Nebinger, of Philadelphia, it was,

Resolved, That a Committee of three be appointed, for the purpose of having the Legislature of Pennsylvania enact a law which shall fully meet the requirements of morality in securing the conviction and punishment of those who practice criminal abortion. Committee, A. Nebinger, Philadelphia; E. A. Wood, Pittsburg; H. L. Orth, Harrisburg.

Dr. S. B. Keiffer, of Carlisle, read the Address in Obstetrics, which was discussed by Drs. Atlee and Nebinger, and referred to the Committee of Publication.

Dr. Allis having offered a resolution relative to the discussion of papers, Dr. Atkinson stated that this matter had been canvassed by several, and that Dr. William Pepper, of Philadelphia, had prepared a resolution on the subject, which he read; this was accepted by Dr. Allis, and was then unanimously adopted, as follows:—

WHEREAS, In view of the brief time at the disposal of the Society for the transaction of scientific business, it seems desirable that some regulation should be adopted in regard to this matter, it is, therefore,

Resolved, That no annual address, save that of the President, shall, in its delivery, exceed thirty minutes. That no voluntary paper shall exceed twenty minutes. That opportunity for debate shall be furnished immediately after the reading of each address or paper. That the time for such debate shall be limited to thirty minutes, unless extended by vote of the Society. That no speaker shall be allowed to

speak a second time without the consent of the Society. And that the time allotted to each speaker shall not exceed ten minutes.

On motion of Dr. Stetler, it was

Resolved, That this Society gives its official endorsement to the proposed bill, introduced at the close of the Address on Hygiene, for the creation of a State Board of Health in this Commonwealth.

Resolved, That the Committee on State Board of Health be instructed to present it, through the appropriate committee, to the Legislature, at its next session.

Dr. Lee, Treasurer, presented his report, showing a balance in hand of over \$900.

It was referred to auditors, Drs. Riggs, Clark and King. These gentlemen shortly reported the accounts as correct.

Dr. B. Rush Senseny, Chambersburg, made some remarks on *vaccino-syphilis*.

On motion of Dr. Nebinger, he was requested to present a paper on that subject next year.

On motion of Dr. Benjamin Lee, it was

Resolved, That the Permanent Secretary be instructed to have printed a sufficient number of copies of the form for Registration of Physicians contained in the Report of the Committee on Medical Legislation, and to forward at least two copies of the same to each prothonotary, and two copies for every member of every county medical society, to the respective secretaries of such societies throughout the State.

The President made the following appointments for 1878:—

To make the Address in Medicine, Dr. Henry T. Coffey, Pittsburg.

Address in Obstetrics, Dr. Wm. Goodell, Philadelphia.

Address in Surgery, Dr. Samuel W. Gross, Philadelphia.

Address in Hygiene, Dr. Benjamin Lee, Philadelphia.

Address in Mental Disorders, Dr. Jas. A. Reed, Dixmont.

The Committee of Publication, Dr. W. B. Atkinson Chairman, reported that they had printed 1150 copies of the volume of Transactions for 1876, at an expense of \$1295.87. Of this number 1032 were distributed to medical societies, 41 to medical and other journals, and 41 to State boards of health, and other officers.

On motion, the report was accepted and ordered to be entered on the minutes.

On motion, the Society adjourned to meet at 9 A. M. on Friday.

FRIDAY, JUNE 15TH.

The Society was called to order by the President at 9 A. M.

A number of the county societies presented their reports, which were referred to the Committee of Publication, and on motion of Dr. Atkinson, the other societies were allowed three weeks to hand in their reports.

The Permanent Secretary read the report of Dr. C. C. Halsey, as delegate to the New York State Medical Society.

Dr. Stetler then called up the amendments offered last year. The first was unanimously adopted, making a verbal alteration as to the delivery of the address by the President.

The second amendment was withdrawn. Dr. W. L. Atlee, on behalf of Dr. Hiram Corson, who was absent, offered the following:—

WHEREAS, The State Medical Society has taken a deep interest in the welfare of the insane, during the past few years, as is evidenced by the efforts which it has put forth for the founding of asylums; and

Whereas, The inmates of our State hospitals are composed of nearly equal numbers of the two sexes; and

Whereas, We now have many female physicians who are eminent practitioners, and some who have had experience in the medical management of the insane. Therefore

Resolved, That a committee of three persons be appointed by the President of this Society, to report to the meeting to be held in May 1878, on the propriety of having a female assistant superintendent for the female department of every hospital for the insane which is under the control of the State.

This was unanimously adopted. The President appointed as the committee, Drs. Hiram Corson, Andrew Nebinger, R. L. Sibbett.

On motion of Dr. R. Clark, three additional delegates were elected to the American Medical Association—Drs. A. J. Werner, T. W. Shaw and E. S. Riggs.

Dr. Traill Green introduced Mr. A. H. Jones, who made some remarks on the manufacture of quinine in America.

After which, on motion of Dr. Green, the following was adopted unanimously:—

To the Senate and House of Representatives of the Congress of the United States:—

We, the Medical Society of the State of Pennsylvania, respectfully represent the necessity of maintaining the supply of quinine from manufacturers established in this country. The purity and excellence of the American quinine have become proverbial, and the whole medical and pharmaceutical community rely with absolute confidence on the product of American manufacturers.

It is of the first importance that this country should maintain its independence in respect to the supply of this indispensable medicine. The health of large numbers of our inhabitants, and the prosperity of whole districts of country, depend upon a large and steadily growing production of American quinine. No legislation should be allowed to lessen it or to make the country dependent on uncertain and unreliable sources in lieu of the present well established domestic manufacture, with its uniform standard of excellence.

Dr. James McCann, Pittsburg, on behalf of Dr. W. R. Hamilton, Pittsburg (absent), read a paper on "a Modification of Syme's Amputation at the Ankle Joint."

On motion it was referred to the Committee of Publication.

Dr. H. L. Lenher, Harrisburg, offered the following amendment to the Constitution:—

In Article III, Section 5, strike out the clause "continues to reside in the county for which he was originally delegated." Add to the Section "Any member of this Society may, by change of residence, transfer his membership to any other regular county society, without prejudice to his standing in this Society."

Bills were presented and ordered paid.

Dr. Lee exhibited an improved wheel crutch.

On motion of Dr. Stetler, the Standing Committee was continued.

On motion of Dr. J. L. Atlee, the President, Dr. R. B. Mowry, was continued in office until the installation of his successor (the President-elect, Dr. Agnew, being absent).

On motion of Dr. Stetler, it was

Resolved, That the thanks of the Society are hereby tendered to the retiring President, for the ability, courtesy, and impartiality with which he presided.

Resolved, That the thanks of the Society be, and are hereby, tendered to His Excellency, Governor John F. Hartranft, for the cordial reception given to the members of this Society last evening.

On motion of Dr. Shaw, thanks were tendered the Dauphin County Medical Society, for their courtesies and the elegant entertainment of Thursday evening.

On motion of Dr. J. L. Atlee, thanks were tendered Dr. George W. Reilly, Harrisburg, for his very handsome entertainment on Wednesday evening.

On motion of Dr. Stetler, thanks were tendered the authorities, for the use of the Capitol.

On motion of Dr. Green, thanks were tendered the Committee of Arrangements, for the excellent manner in which they carried forward the business of this session.

Dr. Mowry having made some retiring remarks, on motion of Dr. Atkinson, the Society adjourned to meet at Pittsburg, on the last Wednesday of June, 1878, at 3 p. m.

The delegates having visited the Insane Hospital, under charge of Dr. John Curwen, and having been most hospitably entertained, at an informal meeting, on motion of Dr. H. L. Hodge, Philadelphia, it was

Resolved, That the Medical Society of Pennsylvania have had a very pleasant visit to the Insane Hospital; that they are highly pleased with its efficient management, and they tender their thanks to Dr. Curwen for the pleasant entertainment, and hope he may long live to carry on his useful and benevolent work.

THE NEW YORK STATE MEDICAL SOCIETY.

The Medical Society of the State of New York convened at Albany, June 19th, and was called to order by Dr. E. R. Squibb, of Brooklyn, President of the Society. There was an

attendance of over one hundred members. The session was opened with prayer by the Right Rev. Bishop Doane.

The President then proceeded to read his opening address, in which he congratulated the members of the Society on its prosperity, and suggested, for its still further advancement, that the presiding officers be selected with the single purpose of getting good active servants of the Society, who would carry out its work with impersonal energy; that the presiding officer should carry out and be responsible for the work of the Society at the meeting over which he presides; that the address which usually occupies the Wednesday evening session be discontinued, or at least the penalty of \$25 for failure to deliver it be abolished; that the Secretary's annual salary be increased to \$500, or that the editorship of the Transactions be separated from the duties of the Secretary, and given to an editor; that each volume of the Transactions hereafter should have a copious index; that a list of delegates by counties, with the time of election and expiration of service, should precede the list of permanent members, and be kept up with official accuracy, so that the true character and construction of this body as a society of delegates should be more prominent; and that the Treasurer should receive compensation for the time and labor required of him by the society.

The President further says that he has during the year signed a petition to the Legislature for the passage of an act to provide for the sanitary inspection and supervision of common schools and school buildings in New York city. Dr. Frank H. Hamilton, of New York, had been appointed to the vacancy in the delegation to the American Medical Convention.

Dr. R. W. Pease, of Syracuse, read a paper, on the Recent Improved Methods of Diagnosis and Treatment in Urethral Surgery, with tabulated statement of results in forty-five cases.

Dr. J. Kneeland, of South Onondaga, read a paper, entitled "Two Cases of Sudden Death—Coroner's Inquests." Accepted and referred to the Publishing Committee.

The chairman of the Business Committee read, by title, a paper, entitled "An Obituary Notice of James Thorn, M. D.," by R. H. Ward, M. D., of Troy.

Dr. A. Van Derveer, of Albany, read a paper, entitled "Operation for Closure of Cleft of Hard Palate," with report of cases. The paper was discussed by Dr. Goodwilly, of New York, who presented a wax cast of a subject on which he had operated, and gave an illustration of the manner in which the operation was performed, exhibiting the instruments used.

Dr. William C. Wey, of Elmira, read a paper, entitled "Sanitary Inspection in Schools."

The Business Committee reported a paper, entitled "Hydrophobia; Rabies Canina," by John W. Greene, M. D., of New York. The President read a letter from Dr. Greene, stating that he was unable to prepare the paper, on account of professional engagements.

Dr. Wey moved that Dr. Greene be requested to complete his paper within thirty days, and that it be referred to the Committee on Publication, with power. Carried.

Dr. Greene has paid considerable attention to this subject, and is thoroughly posted thereon. He is recognized by the profession as an authority on hydrophobia, and his paper will doubtless be a very valuable one.

Dr. H. T. Hanks, of New York, read a paper, entitled "The Forceful and Rapid Dilatation of the Cervical Canal, for the Cure of Anteflexion." Referred to the Committee on Publication.

Dr. John Ball, of Brooklyn, read a paper, on "Forceful and Rapid Dilatation," etc.

Dr. S. L. Parmalee, of Watertown, read a paper, entitled, "Punctured Wound of Lung, Diaphragm and Liver, with Recovery," which gave rise to some discussion as to whether the liver was punctured or not.

Dr. Joshua B. Graves, of Corning, read a paper, entitled, "Report of a Case of Fracture of the Base of the Skull; with Recovery."

SECOND DAY.

On the following day the question of changing the date of holding the annual meeting came up, and gave rise to an extended discussion.

A motion to hold the annual meeting on the third Tuesday of January was finally adopted.

This question disposed of, the reading of papers was next in order, when Dr. Julius F. Miner, of Buffalo, read one, on "The Feasibility of Removing the Thyroid Gland in some Cases of Disease," with an illustrative case.

Dr. Austin Flint, of New York, followed with one, on "Pneumonic Fever Grounds for Considering Acute Pneumonia an Essential Fever, and not Purely a Local Inflammation."

Dr. Mary Putnam Jacobi presented "Two Cases of Convulsive Disorder without Convulsions." All the papers were discussed at some length."

The subject of establishing a committee to determine the qualifications of students in medical colleges, when about to enter the profession, the services to be tendered to such colleges as may desire them, did not come up, owing to the absence of Dr. E. M. Moore, of Rochester, chairman of the special committee which was to report on the matter.

Dr. Edward H. Parker, of Poughkeepsie, read a paper, entitled "Heredity as a Factor in Pauperism and Crime." The paper was a practical statement of the "Tramp Nuisance," giving statistics, etc.

Dr. J. W. S. Gouley, of New York, read a paper, entitled "Stone in the Bladder."

Dr. George Bayles, of New York, read a paper, entitled "Nitrite of Amyl in Pertussis."

Dr. C. H. Giberson, of Brooklyn, read a paper, entitled "The Cold Bath in Scarlatina"—clinical notes.

The paper was discussed by Mrs. Dr. Jacobi, and Dr. Kneeland.

Dr. Alexander Hutchins, of Brooklyn, read a

paper, on "Jaborandi," which was referred to the Publication Committee.

Dr. A. N. Bell, of Brooklyn, Chairman of the Committee on Hygiene, read an abstract of the report of the committee, and it was referred to the Committee on Publication.

Dr. Norman L. Snow, of Albany, read a paper, entitled "Pseudo-Membranous Laryngitis—Tracheotomy—Relapse and Recovery." The paper was discussed by Dr. Goodwilly, of New York.

President Squibb read a paper, entitled "Tar Fumigations in Gangrenous Sores;" written by Lewis Post, M. D., of Lodi, an honorary member of the Society. The paper was accompanied by a letter from Dr. Post, giving the history of a disease with which he is afflicted, supposed to have arisen from the sores of the case reported.

Dr. C. G. Pomeroy, of Newark, N. Y., read a paper, on "Hydrochlorate of Ammonia—Ammonia Murias," which was referred to the Publication Committee.

Dr. Henry G. Piffard, of New York, read a paper, entitled "Certain Points Relating to the Nature and Treatment of Lupus." Referred to the Publication Committee.

Dr. Ira F. Hart's paper, on "Hereditary Transmission of Disease," was read by title, and referred to the Committee on Publication.

THIRD DAY.

The following officers were elected:—President, Dr. J. Foster Jenkins, Yonkers; Vice-President, Dr. Augustus L. Saunders, Brookfield, Madison county; Secretary, Dr. William Manlius Smith, Manlius, Onondaga county; Treasurer, Dr. C. H. Porter, Albany.

The Committee on Prize Essays reported by telegraph, in relation to the Merritt H. Cash fund, as follows: "No essays, no funds no awards."

About one-half of the permanent members of the society, and several of the county medical societies, have not paid their dues, which accounts for the present condition of the treasury.

Dr. Hiram Corliiss, of Washington county, the oldest physician in this State, bade the society an affectionate, and as he thought probable, a last farewell, as he does not expect to be able to meet in regular session again. He gave some advice to the members, and complimented President Squibb for his able administration, which has been marked with great executive ability.

After reading several other papers the society adjourned to meet the third Tuesday in January, 1878.

EDITORIAL DEPARTMENT.

PERISCOPE.

Quinine and Carbolic Acid.

At a late meeting of the Atlanta Academy of Medicine, Dr. Todd said that he had occasion recently to prescribe quinine for bronchitis. The patient took, in three hours, five grains, when he was summoned. He found him broken out, from head to foot, with urticaria, hoarse, and nauseated. The urticaria was causing intense pain and itching; so much so that rest in same position for any length of time was impossible. It required several large doses of morphia, and eight or ten hours elapsed before he was relieved. The patient told him quinine had produced the same effects once before on him, since he lived in Atlanta, but that in South Georgia, where he had chills, it produced no such symptoms. The mother of the patient, a very intelligent lady, says it affects her in a similar manner.

Dr. W. F. Westmoreland had seen the same results from one and a half grains quinine and a quarter grain ex. nux vomica, as a tonic.

Dr. Taliaferro had seen two cases where quinine was always followed by urticaria. In one case it produced the rash on several differ-

ent occasions. There was in the other a genuine shedding of the cuticle during convalescence.

Dr. Todd, speaking of carbolic acid, before the same Society, said, according to Dr. Bell, of the army, who has written the most elaborate and sensible article on carbolic acid he had read, one of its greatest virtues was its power of diminishing the pain in cancer, administered internally. In two of his cases he had tested this alleged virtue with complete satisfaction. It is, locally, anaesthetic, and will obtund sensibility to such an extent that boils might be opened, and the amputation of the fingers and toes may be done without pain, after a concentrated solution has been applied.

Cerebral Hemorrhage in Kidney Disease.

Dr. George Johnson, of London, says, in a recent Lumleian lecture:—

Among the accidental injuries which result from the high arterial tension associated with renal disease, one of the most frequent and most serious, is the occurrence of *rupture of one or more intracranial arteries*, and consequent hemorrhage into the substance or on the surface of the brain. It has been a debated question with some writers on cerebral hemor-

rhage, whether the occurrence of that accident is favored by hypertrophy of the left ventricle. When hypertrophy of the heart is a result of disease of the aortic valves, or of degeneration with impaired elasticity of the walls of the large arteries, it is generally no more than sufficient to overcome the impediment thus offered to the circulation. The strength of the left ventricle, therefore, in such cases is not a true measure of the force with which the blood is sent into the distal arteries. On the contrary, it is a measure of the difficulty with which the blood is transmitted through the primary branches, and, therefore, through the entire system of arteries. When hypertrophy, thus originating, is associated, as it sometimes is, with cerebral hemorrhage, the reason is that the hypertrophy and the hemorrhage are joint results of one common cause, namely, degeneration pervading more or less extensively the arterial tree. The hypertrophy of the left ventricle is a consequence of degeneration of the aorta and its primary branches. The cerebral hemorrhage is a consequence of a similar degeneration of the arteries of the brain.

The state of the circulation is very different when the left ventricle has become hypertrophied, in consequence of the impediment resulting from contraction of the hypertrophied muscular arterioles in connection with degeneration of the kidney. In this state of things, while the arterial stopcocks are resisting the passage of the morbid blood, the strong left ventricle is forcibly driving it onward. There is thus an excessive strain upon the whole length of the arterial pipes, between the stopcocks and the cardiac forcing-pump. One of the bits of arterial tubing being overstretched, becomes brittle, and breaks; then the powerful ventricle forces the blood through the ruptured artery into the yielding tissue of the brain, and a rapidly fatal sanguineous apoplexy is the result. It is a well known fact that some of the most formidable cases of cerebral hemorrhage are those which are associated with granular contraction of the kidney.

Method of Dressing Wounds.

The London *Medical Record* says that Dr. Dumreicher had adopted a plan which favored healing by the first intention within a short time. The incisions were made in such a manner as to best favor the apposition of the edges of the wound. The bleeding vessels were tied with catgut, in order to avoid suppuration. To induce sufficient exudation for the firm union of the edges of the wound, these were washed with a solution of chloride of zinc (four to eight per cent.), and the wound was not closed until all bleeding had ceased. Drainage tubes were used, to remove secretions from cavities. In order to prevent the dressings from adhering, tissue-paper dipped in wax was applied over the surface of the wound; and apposition was maintained by means of cotton-wool, jute, strips of adhesive plaster, etc. Dr. von Dum-

reicher had used this plan in twenty-four operations, viz., six cases of removal of the breast, two cases of lipoma, two of caries, three of incarcerated inguinal hernia, one of periostitis with necrosis, two of ganglion, three of hydrocele, one each of cold abscess and inflammation of the breast, and three of amputation. The result was astonishingly favorable. Two of the amputation cases died of pyæmia.

On Aphonie Pectoriloquy.

Dr. Hermet, in his *Thèse de Paris*, has studied the new indication, given first by Baccelli, then by Gueneau de Mussy, for the diagnosis of the nature of pleural effusions, and has proved its presence in pulmonary affections. The *résumé* of this memoir is as follows: Aphonie pectoriloquy is the clear distinction of the voice, when the patient auscultated speaks in a low voice. It exists in all the pulmonary affections associated with induration; induration is the condition *sine quâ non* of its production. Thus we hear it in the first stage of pulmonary phthisis, in the second stage of pneumonia, it, in the latter case, the *souffle* persist. It is also heard in the excavation stage of pulmonary phthisis, but with a peculiar sound. In the first stage of phthisis, when it can only be suspected by antecedents and certain functional troubles, aphonie pectoriloquy may possess a real diagnostic value. It is also heard in pleural effusions, and in pneumothorax. Compression of the pulmonary tissue by effusion, in the case of pleurisy, and by air, or the liquid, or both together, in the case of pneumothorax, may, perhaps, explain the mechanism of its production. Finally, as MM. Baccelli and Gueneau de Mussy have proved, it helps in making the diagnosis of the nature of pleural effusions; when aphonie pectoriloquy exists, the effusion is serous; where it is wanting, the effusion is purulent.

The Continued Bath as a Therapeutic Measure.

At a meeting of the Surgical Society of Ireland, Mr. Stokes said, some years ago, he drew attention to the value of the continual bath in certain cases of injury as well as surgical disease, and he devised a mode of keeping up an equable temperature in the bath, but he found great difficulty in carrying out that treatment, owing to the strongest objection being manifested on the part of the patients to the method. But he was aware, and from his own experience he was satisfied of the great utility of it, and also from having observed in the *Clinique* of Professor Hebra, of Vienna, the use of the continual bath, especially in cases of psoriasis. The advantage he had seen only in cases where the bath had been applied for a great length of time, a length of time that would seem almost incredible. He had known cases in which the patient was kept day and night in a warm bath for six weeks. He was very

doubtful whether that was generally practicable. When he had tried it himself, he had failed to induce patients to continue it sufficiently long. In another class of cases—recent burns—he had found the greatest benefit. As professor Mapother had alluded to the treatment of ulcers after burns, in that condition Mr. Stokes had observed the use of the continual bath, but only in cases where the burn had been recent, just after the accident had occurred, and great advantage was derived. According to Hebra, the bath had a wonderful power in diminishing pain. He (Professor Hebra) believed that pain had much to say to the fatal issue of these cases, and the diminution of such a result by the use of the bath was most marked; and that he (Mr. Stokes) could certainly indorse.

On the Use of Podophyllin in Hemorrhoids.

Dr. Rivière, in the *Gazette des Hôpitaux*, December 16th, states that he has had fifteen cases which were most conclusive as to the value of podophyllin in hemorrhoids. Among the constipated patients, for whom he prescribed podophyllin, many suffered from hemorrhoids, which he attributed to permanent constipation; that is to say, to the congestion which was its natural consequence. Subject himself to hemorrhoids, though not habitually constipated, Dr. Rivière tried the podophyllin on himself, and found immediate relief. The hemorrhoids again made their appearance, but were removed by the same means. He has since frequently employed the same method of treatment, and always with equal success, giving one or two podophyllin pills of one-fifth of a grain each, so as merely to soften the fecal mass. Encouraged by this success, Dr. Rivière tried podophyllin for chronic hemorrhoids likely to necessitate operation. In these cases also he obtained immediate relief, and a cessation of all the usual distressing symptoms of this affection. The only drawback was the necessity for the daily administration of podophyllin. In some instances, however, the patients were able to leave off the use of the medicine for a long time. Some even were entirely cured.

The Salicylates in Acute Rheumatism.

Dr. Sawyer, of the Queen's Hospital, Birmingham, relates in the *Lancet* three successful cases, on which he observes:—

Than acute rheumatism few diseases have been met by a greater diversity of remedies, and in none ought we to be more cautious in drawing therapeutic inferences. During the last nine or ten years, and until a few months ago, I have treated some hundreds of cases of acute rheumatism in the following manner:—The patient has been laid in bed, between blankets, the affected joints have been swathed in cotton wadding, and fifteen or twenty grains of bicarbonate of potash have been given every

four or six hours. Inflammatory cardiac complications have determined the application of a fly blister, or a few leeches, over the heart; a dose of Dover's powder has been administered in the evening, when there has been sleeplessness. The three patients whose cases are here recorded as decided but mild examples of acute rheumatism, were admitted into the hospital on the same day, and to each the salicylate of soda was regularly given. In the first case the temperature became normal upon the seventh day, the ninth day of the disease, and remained at a healthy range until the patient's discharge at the end of twenty days; in three days all pain ceased, and there was no return of it. In the second case the temperature fell to the range of health upon the seventh day, the ninth day of the malady, and remained normal for twelve days more, when the patient was discharged; on the third day all pains in the joints ceased, and they did not return. In the third case the temperature became natural upon the fifth day, the seventh day of the disease, and it did not subsequently leave the normal range; on the fifth day pain disappeared, and did not afterward return. In two of the cases there was a limited and transient pericarditis. All the three cases coincided in their rapidly favorable course, and it is not improbable that the use of the salicylate of soda was one of the causes of such satisfactory result. It is only when a very large number of cases shall have been observed that we can reasonably conclude whether the salicylates are or are not to be regarded as empirical remedies for acute rheumatism. My own limited employment of these drugs has given results which lead me to regard the salicylates as likely to attain a permanent place in the therapeutics of rheumatic affections.

Bell's Method of "Visible Speech."

This method of instructing deaf mutes is not favorably received in England. Dr. E. Symes Thompson says of it, in the *Medical Times and Gazette*:—It has been found necessary to relinquish the system in teaching the deaf, as it introduces an element of complexity where simplicity is essential. The point the oral teacher aims at is to enable the pupil to read words from the lips, and to imitate them. It is found that if the attention is divided between the lips and signs, no progress is made with lip-reading. Again, if the alphabet is taught as a necessary preliminary to the use of words, the same needless difficulty is introduced. Still more is this found to be the case if the pupil is obliged to learn a new alphabet (the visible speech letters), and has to translate every word into the new language before he can understand it and give it utterance. Much use is wisely made of the visible speech characters in teaching adults to overcome defective pronunciation—for instance, in the case of persons recently operated upon for "cleft palate." But, after earnest and patient trial in

a school under my observation, I am satisfied that it introduced needless difficulty, and that the "German system" of articulation and lip-reading, which allows no signs, no manual alphabet, and no alphabet at all, at first, is really far better suited for the deaf than the clever method of Mr. Graham Bell.

Copper in Canned Peas.

The British Medical Journal says:—

It is satisfactory to find that the poisoning of peas and other green vegetables used as articles of food has been made the subject of a formal report by M. Pasteur. The Council of Hygiene and Health have remitted the investigation to this eminent French chemist. He was required to state, irrespectively of all trade views or commercial profits, whether these substances were or were not colored with any compound injurious to health. He examined fourteen tins of preserved peas, purchased indiscriminately of dealers in the best quarters of Paris, and he found in ten of them copper, in some instances in considerable proportion. The sole object of this adulteration was to give to the preserved the green tint of natural peas. It seems that peas in drying always acquire a yellowish tint, which renders them unsalable. The addition of copper-salts, or the use of copper vessels in preserving them, removes this commercial defect, and, according to some evidence which we have heard recently in England, it gives to the peas tonic and other medicinal properties beneficial to those who eat them! M. Pasteur found the copper deposited, in an insoluble form, in the solid tissue of the peas, below the external coat. In some of the tins, the copper amounted to about the thousandth part of the entire weight of the food. The liquid in which they were immersed also contained copper, but in smaller proportion. M. Pasteur states that green French beans, asparagus, and artichokes, in fact, all green provisions used as food out of season, *i. e.*, during the winter, owe their attractive green color to the same mineral.

REVIWS AND BOOK NOTICES.

NOTES ON CURRENT MEDICAL LITERATURE.

—“A Chart of Skin Diseases.” By J. V. Shoemaker, A.M., M.D. In this chart, which gives the arrangement of diseases of the skin as taught by the author at the Philadelphia School of Anatomy, a condensed definition of each affection accompanies the technical term. The primary and secondary alterations of the skin are given, followed by a classification, of a simple and practical character, which has been carefully made up from the systems now in use, but contains some new features of interest.

BOOK NOTICES.

The Relations of Ancient Medicine to Gynecology.

By Edward W. Jenks, M.D. A reprint from the *Detroit Medical Journal*, May, 1877.

This is a most interesting historical paper, and it is quite impossible to do it justice in the limited space we can allow for its notice. While we may “glory in the wonderful achievements and scholarly attainments of the medical men of our own generation,” Dr. Jenks plainly shows us that we have good reasons for not forgetting the fathers, “who laid broad and deep the foundation” of medicine. We find, however, in ancient gynecology, “many strange and curious theories, absurdities mixed with common sense, and improbabilities with rational treatment, and many suggestive and valuable thoughts.” The author thus places before the reader a few of these. The speculum can be traced, by a connected history, from *Aetius* down to the present day. *Aetius* studied and lived in Alexandria, and spent his lifetime condensing and compiling all that was known of medical literature up to the period in which he lived. It is said his work is the most valuable existing book on ancient medicine.

Paulus refers to pessaries. Hippocrates wrote on sterility. “There is in Paulus an interesting chapter on difficult labor.” There are good reasons for believing that the Arabians were acquainted with the forceps. The early Greeks and Romans, as far as their writings are concerned, were unacquainted with their use, although the instruments were found in the ruins of Pompeii. The forceps may have been kept a family secret, even as they were in recent years, by the Chambelains.

To any one at all interested in the history of medicine, this paper will well repay careful perusal.

Case of a Bearded Woman, by Louis A. Duhring, M. D., Professor of Skin Diseases in the Hospital of the University of Pennsylvania.
A reprint from the *Archives of Dermatology*.

The first page contains a portrait of this remarkable case. “At the age of three years hair was present over the sides of the cheeks, after the manner of whiskers, a slight, flaxen lanugo,” and this continued to increase in quantity and length from year to year. At ten

years of age the hair began to grow vigorously, and at this time hair on the upper lip first manifested itself in a notable manner. The other features of the female sex are normal. She has had two children—a boy and a girl; they show no signs of the mother's deformity. A careful description of her present condition is given. The family history reveals no unusual growth of hair. In summing up some especial points, the author says:—"The hair of the face was a congenital condition, a certain amount of lanugo having been present at birth; and this explains, in a measure, some of the peculiarities of the case. Had the hair of the face been an acquired growth, appearing at puberty and depending upon sexual development, there would have been, no doubt, other decided masculine characters present. The increase of the hair of the scalp, axilla and pubes is also an occurrence worthy of remark. These regions were manifestly not under the same influence as that which regulated the growth of hair elsewhere. The most interesting feature is the complete absence of all signs of masculinity, either in physical structure or disposition. It is common to observe, in congenital hirsutes, that there is more or less irregularity of teeth; in this case the teeth were unusually regular. There is no reason to suppose that any hermaphroditic element exists in the constitution of the case. Menstruation was established at fourteen, and has occurred with regularity. It is concluded that all that can be done for the patient is palliative—the daily use of razor, or employment of depilatory powder. In this case, considering the extensive surface to be operated on, he would favor the use of the razor."

Transactions of the American Gynecological Society. Volume I. For the year 1876. Boston, H. O. Houghton & Co., 1877. Cloth, pp. 396. Price \$5. For sale by Claxton, Remsen & Haffelfinger.

This volume, gotten up with unwonted luxe of paper, in the best typographical style of the Riverside Press, is a marked contrast with the *Transactions* of societies of the olden time. The matter is not unworthy of the form. We are presented with a series of essays, nearly every one of which is a carefully finished study of some part of gynecological science, by a writer whose name is a guarantee for his work.

Thus, we have from Dr. T. Gaillard Thomas an eminently instructive paper on laparotomy in abdominal pregnancy, showing that this operation may bring this terrible accident to a successful issue. Dr. Byford, of Chicago, describes the spontaneous and artificial destruction and expulsion of fibrous tumors of the uterus, illustrating that we can initiate their spontaneous expulsion by the proper use of ergot in certain cases. The eminent Dr. Robert Barnes, of London, has a thoughtful and extremely well written essay on the relations of pregnancy to general pathology, suggestive, however, rather than conclusive in its teachings. Dr. Robert Battey, of Georgia, whose name is associated with "normal ovariotomy," contributes on this topic a quite complete article, showing when it is legitimate operation and when not. Dr. Thomas Addis Emmet has a study of uterine flexures, in regard to their etiology and treatment. It briefly touches on statistical matter, and brings into prominence the use of the cutting instrument in aiding in restoring the uterus to its correct position. The historical and didactic study of pneumatic self-replacement in dislocation of the gravid and non-gravid uterus, by Dr. Henry F. Campbell, of Georgia, is an admirable exposition of the subject. The genital lesions of childbirth is the topic of a brief but condensed paper by Dr. William Goodell, while Dr. J. Matthews Duncan, of Edinburg, has one upon central rupture of the perineum.

Besides these, there are a number of noteworthy shorter articles: on Cicatrices of the Cervix Uteri and Vagina, by Dr. A. C. Skene; on the Uses of the Viburnum Prunifolium in Diseases of Women, by Dr. E. W. Jenks; Xenomenia, by Dr. T. Parvin; on Hydrate of Chloral in Obstetric Practice, by Dr. W. L. Richardson; on Latent Gonorrhœa, by Dr. E. Noeggerath; on Labor Complicated with Uterine Fibroids and Placenta Prævia, by Dr. J. E. Chadwick; on Death from Urinæmia in Malignant Diseases of the Uterus, by Dr. A. Wiltshire; on Hermaphroditism, by Mr. Lawson Tait; Cases of Cystic Tumor, by Dr. G. H. Bixby; a Case of Uterus Bipartitus, by Dr. E. R. Peaslee; Calculi in the Bladder after Vesico-Vaginal Fistula, by Dr. H. F. Campbell; Umbilical Hernia in the Fœtus, by Dr. J. R. Chadwick; and a sketch of the life of Dr. G. Simon, with a portrait, by Dr. P. F. Munde. The opening address is by Dr. Fordyce Barker.

THE
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 A WEEKLY JOURNAL,
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D. G. BRINTON, M. D., EDITOR.

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ADVERTISING BY PHYSICIANS.

The action of the Nebraska State Medical Society in supporting and countehancing a firm of physicians who advertised themselves largely by the secular papers, and by circulars, as surgical specialists, leads to the belief that there are physicians who honestly can see no objection to one of the profession pursuing this course. The ordinary newspaper editor, of course, rejoices in seeing bodies of physicians won over to approving this course, because it brings grist to his mill. Quack doctors are famous advertisers, and if doctors who are not quacks could be induced to advertise they would largely increase his revenue.

We have been asked, in all seriousness, why should a physician be prohibited from advertising himself? The answer chiefly is, that it cannot be done without deceiving. The public cannot judge of the merits of a physician except by gradual observation of his handling of cases. If learned and skillful, he will surely

ultimately gain the confidence of the community, while another may have all the titles that he has, all the diplomas and certificates, yet be ignorant and careless. The former could frame no advertisement that the latter could not equal; therefore, the best men in the profession would be beaten in that game by the worst, and the public be duped, and suffer.

The regular medical profession stand now before the community, saying: You can know us only by our fruits. He who tells you his wonderful cures, and boasts of his great skill, is a man who does not wish to be judged by his fruits, but by his words; beware of him, he is deceiving you.

This invaluable shield would be thrown away were professional vigilance at all relaxed on this subject.

Moreover, in advertising, notoriously the longest purse wins; and if there were no other objection, this alone should deter every honest member of a learned profession from aiding the victory of money over merit.

But specialists say they ought to be exempt from these rules. Their reasons are various. But the same doctrine applies. It is proper enough for them to make known to the profession that they practice a specialty. It is not amiss in districts where professional men are accustomed to have cards in the newspapers, for the specialist to have his card, stating his specialty. But praises of his skill, lists of cures, pictures of his cases, details about his education and apparatus, should not be allowed; still less the distribution of circulars in non-medical hands.

Wherever high professional education prevails, there the attempts at advertising to the public are inconspicuous. Even with the aid of this potent arm, ignorance cannot overcome knowledge. When all is done, it is not the able and skillful physician who suffers, nor need he fear the result; but it is the uneducated public, the poor mechanic, caught by the bait of "cure guaranteed," the hopeless consump-

tive, the hysterical woman, the sufferer from cancer, who are plundered and robbed by these deceptive advertisements. For their sake, let us have done with them.

NOTES AND COMMENTS.

Ingrowing Toe Nail.

Dr. C. G. Clarke, formerly of Indiana, writes us:—When practicing medicine in Indiana, some time since, I found a practice in vogue among those of the country people who were troubled with the "ingrowing" of the edges of the toe nail, which I give for the benefit of your readers who may not already be acquainted with the plan. It consisted, simply, in scraping, with the point of a sharp knife, a longitudinal line along the middle of the whole nail, and almost to the "quick." By this means, when the boot pressed on the nail, the latter would "give" in the centre, and thus tend rather to lift the edges of the nail than to press them into the toe. I have tried this plan in my own case with the happiest results; and as I do not remember ever having seen it mentioned in print, I give it for what it may be worth.

Drainage by Catgut Threads.

Mr. Heath, of Manchester, has of late employed a form of drainage introduced into practice by Mr. Chiene, of Edinburgh. Several threads of catgut are tied together in a bundle and placed across the incision wound; the ends are brought out at the most convenient points for drainage, and the edges of the wound adjusted by catgut or wire sutures in the usual manner. In five or six days slight traction on the ends of the catgut skein will remove it in two pieces, and it will be found that the threads have been dissolved in the wound. In amputation of the breast, one end of the catgut drain-threads is brought out at the inner angle of the wound, and the other through a separate opening in the most dependent part of the lower flap.

Valerian in Diabetes Insipidus.

Trousseau, we believe, first urged this remedy. The following illustrative case is given in the *British Medical Journal* for May:—

A healthy looking man, aged fifty-three, complaining of thirst and debility, had been

under treatment since February; he then weighed twelve stone, twelve pounds, and was passing eight pints and a half of urine, of specific gravity 1008 (average). He had noticed loss of flesh for eighteen months, having lost two stone weight by Christmas last, at which time thirst became a prominent symptom. No determining cause was apparent; his previous health had been good. No lung change was perceptible. He had not been able to discover any change in symptoms to be dependent on diet, but found that beer made him worse; he takes sherry and water. He has been continuously treated with extract of valerian only, in increasing doses of four, eight, twelve and fifteen grains three times a day, and is now taking forty-five grains daily. At present, the amount of urine is five pints daily, of specific gravity 1012; no albumen, no sugar. He weighs thirteen stone, and is improved in his general health.

Salicin in Intermittent.

As we have before remarked, salicin was much used instead of quinine by the Confederate surgeons. A writer in the *British Medical Journal* quotes earlier authorities. Sobernheim, in 1844, writes:—

"Lately, salicin has been largely employed in the treatment of ague. Blom, especially, speaks much of it (*Medical Observations and Contributions on Salicin*, translated from the Dutch by Salamon; Potsdam, 1835). Blom gave it with advantage in five cases of ague, in doses of one grain every hour; in three cases of chronic diarrhoea, etc. It has this advantage over quinine, that it does not interfere with digestion, and causes no congestion to the head, and is, therefore, well adapted to persons of a plethoric constitution and of dyspeptic habit. Krombholz tried salicin in ague and intermittent facial neuralgia (*Medical Annual for the Austrian States*, 1834, vol. vi). Salicin, combined with an acid, acts more powerfully, for instance, in pills with citric or tartaric acid, or as a drink with diluted sulphuric acid (*Gazette Médicale*, January, 1833). . . . It may here be observed, that as a substitute for quinine it is very dear, and also that it requires a much larger dose to quell the fever. Dose—salicin, grains six, three or four times a day in ague (Bally); or also grains five, six or eight every half hour in the apyrexia, shortly before the attack."

Guarana in Migraine.

A correspondent writes to the *British Medical Journal* :—Having used guarana in a great many cases, I have come to the following conclusions :—

1. True migraine, characterized by acute frontal pain, commencing on one side, occasionally both, or going from one side to the other, usually lasting from twenty-four to forty-eight hours, with or without sickness, and relieved or cured by sleep, whether caused by errors in diet or not, will almost invariably yield to it.

2. In young persons, in whom the habit is only commencing, not only does it cure each individual attack, but, by persevering, the habit itself is broken.

3. One cause of failure is the smallness of dose, so that, in many cases in which it has been tried before and failed, an increase of the dose has been followed by cure. Twenty-five grains of the powder is my usual dose for an adult female, half a drachm for a man; less, of course, for younger cases, repeating in one or two hours, if necessary.

Poisoning by Sulphate of Copper.

MM. Feltz and Ritter read a note recently, on acute poisoning by sulphate of copper. The result of their experiments was that the action of sulphate of copper is not fatal; death only supervenes when the vomiting is not rapid and energetic, and in these cases the doses must be so powerful that no one would swallow them of his own accord.

Personal Disinfection of Physicians.

Dr. Seaton, medical officer of Health, remarks, in a late lecture:—There are many occasions where the clothes of the medical attendant require disinfection, as, for instance, after visiting a group of small-pox or scarlet fever patients. Where the practitioner has been unfortunate enough to have a patient with puerperal fever under his care, the linen requires to be boiled, and the other things baked, before being worn again at a labor. But it is to the hands that he must pay special attention, and it is here that the disinfecting properties of chlorine are particularly useful. The hands should be well soaked three or four times daily, in the chlorinated soda (P.B.). If this is done for a week, baths used at the

same time frequently, and the clothes disinfected, practice may be resumed without danger. Length of absence will not compensate for a neglect of these precautions, as the practitioner may communicate the disease after many months.

Salicylic Acid in Rheumatic Fever.

The *British Medical Journal* says that Dr. Southey, of St. Bartholomew's, frequently uses salicylic acid after the first week of the fever, giving ten-grain doses dissolved in liquor ammoniæ acetatis every two hours, to twelve doses, and then every four hours, or according to the symptomatic indications, but producing slight physiological effects, as noises in the head, etc. Dr. Southey is of opinion that this mode of treatment reduces the temperature, lessens arthritis, and renders the patient less sensitive to the pain; not, however, preventing endocarditis or other complications. In pericarditis, it was pointed out that an amount of effusion, not causing perceptible increase of praecordial dullness, may almost always be detected by an increase in the rapidity of respiration.

The Apollinaris and the Hunjadi Yanos Waters.

These are two mineral waters recently introduced into this country, for which we predict a very wide popularity.

The Apollinaris is bottled near Neuenahr, Germany, and is an acidulated soda water, highly charged with native carbonic acid. As a table water it is delightful, while medicinally it comes to us with the very highest commendations of its value in dyspepsia, torpid liver, the rheumatic and gouty diathesis, catarrhal complaints, and the like.

The Hunjadi Yanos is a Hungarian aperient water, of really remarkable therapeutic richness—beyond any other we know. It is twice or three times the strength of Frederickshall or Pullna, and is not so abominably nasty as these; in fact, has rather an agreeable bitter flavor. As a mild and safe evacuant it is ahead of all yet known, and has been so pronounced by the very highest authorities. Having long preferred to make use of the natural mineral waters, to all other forms of antacids and laxatives, we welcome these two as very valuable additions to our therapeutic resources, and commend them as such to our readers.

CORRESPONDENCE.

The Association of Officers of Institutions for the Care of the Idiotic and Feeble-minded.

ED. MED. AND SURG. REPORTER:—

The Association whose long title heads this letter met this year at Columbus, Ohio. The session was characterized by much harmony, and the advantages of such a reunion were manifested in the able papers read and the interesting interchange of views. The next place of meeting decided on was at Syracuse, New York. Dr. Wilbur, of that city, was elected President. Dr. Doren of Ohio, Vice-President, Dr. Kerlin of Pennsylvania, Secretary and Treasurer.

Of the essays presented, that by Dr. George Brown, of Massachusetts, has, perhaps, the most general interest. It was upon heredity and the prevention of idiocy. He stated that among the agencies at work in our day to effect the race toward deterioration, may be mentioned the large movements of population, from country and rural life toward the towns and cities—from out-door exercises, or laborious mechanical pursuits to lighter kinds of business, and increased exercise of the brain, the excitement and competition of society and of business; and the effects of resort to narcotics and stimulants of alcohol and tobacco, so common and increasing. Then, too, the changes and agencies that threaten the security and permanency of the family relation in marriage, as the foundation of human society, should be carefully studied. Whatever influence tends to change or violate any of the laws governing the functions of the body, especially as it affects maternity, should be most carefully considered.

On the question of constancy of traits, the Doctor says:—We often observe children who have not only the general form and appearance of their parents, and their mental and moral constitutions, but even their acquired habits. Only by diversity and a careful crossing of blood and nature in marriage can generations eliminate taints descended from their ancestry. While health or disease in a parent does not necessarily produce the same condition in a child, vices, habitual or acquired, rarely fail to leave their imprint, so that heritage has more power over the whole character, moral and physical, than all other influences. Many who have given the subject close study regard heritage the sole cause of insanity and cognate diseases. To inherited tendencies are attributed the evil effects experienced by some individuals from exposure to unhealthful influences that the majority of persons might resist without serious consequences.

We have a counter-fact for our encouragement, that “there is, on the whole, a power in nature tending back to a purer type, which reduces perversions to the physiological limits of health.” In spite of want and squalor exist-

ing for a few generations, health is for the great cycle of ages, and crossings in parentage eliminate finally the ill and deteriorated tendency.

It is from this great law of tendency toward the original type of mankind, as in all the animal creation, that individuals avoid the results of unhealthful parentage, and that a moral, upright life may follow a degraded one.

Genius hardly ever transmits genius, but more often a character is vitiated in a greater or less degree, and the line of a genius may end in the asylums for the dependent classes.

I believe the pathological conditions of tissue in the parentage, intensified by the marriage of similar tendencies on both sides, the cause and explanation of idiocy. We say that anything that enervates or shocks the nervous system of the parent affects the offspring directly, but known causes of this kind will explain but a few of the cases of congenital idiocy. Not talents—intellect of the best order on both sides, true religious sentiment, integrity of character—as all history bristles with illustrations, insures exemption from unfortunate children.

Dr. Kerlin presented a very thoughtful essay “On the Organization of Establishments for the Idiotic and Imbecile Classes,” which will command the earnest attention both of specialists in that branch, and of philanthropic legislators.

Yours, ESSEX.

NEWS AND MISCELLANY.

Town and Country Life.

The last report of the commissioners of lunacy for Scotland contains the following:—

It appears that the higher mortality characteristic of town populations manifests itself in a special manner when we look at the statistics of all nervous diseases, but still more remarkably in regard to delirium tremens and general paralysis. This comes out still more distinctly, if we consider the number of deaths in the towns from these several causes, proportionate to 100 deaths from each cause in the insular and mainland-rural districts. Calculated in this way, we find that for every 100 deaths from all causes, in the rest of the country, there are in proportion to population 139 deaths in the towns. For every such 100 deaths from nervous diseases, there are 170 in the towns. For every 100 deaths from delirium tremens, there are 217 in the towns, and the corresponding proportion for general paralysis is 237. We have here a remarkable indication of the special prevalence in towns, of diseases of the nervous system. This, no doubt, results partly from the greater strain which town life makes upon the nervous and mental energy, but probably in a still greater degree from the injurious influences of imperfect sanitary arrangements and hurtful social practices; and it is interesting to find the

opinion that delirium tremens and general paralysis are special products of the dissipation, and feverish activity of town life so strikingly corroborated by the figures.

Small-Pox and Diphtheria in Persia.

Late foreign exchanges say that diphtheria has existed for two years in Persia, and has lately shown itself in unexpected severity; in Shiraz the disease has become almost endemic. With slight variations in intensity it has prevailed the whole year through, and has already cut off nearly all the children. The devastation caused by small-pox in Persia is terrible; vaccination is almost unknown, and is considered a sin. In Ispahan, since December last, 760 persons have been attacked, of whom only thirty recovered, and none of them have escaped without blindness or the loss of one or other of their limbs. In Astrabad, on the Caspian Sea, fifty persons are at the present time dying daily, of small-pox.

Sanitary Work in Russia.

The Grand Duchess Alexandra Petrovna, wife of the Commander-in-Chief of the Army, has converted several of the halls of her palace into a huge workshop, at which all sorts of materials are received, to be made up into articles for the use of the sick and wounded. An immense number of persons of all classes come to the palace every day and take their places at the tables where the materials are distributed. Lately, when the Empress paid a visit to the palace, she found five hundred persons at work.

Careless Ovariectomy.

A case of rather peculiar nature, which occurred at the Alfred Hospital, Melbourne, has given rise to considerable discussion among the profession at the antipodes. It was that of a woman operated upon in the hospital for ovarian disease, and in whose abdomen, after death, a *sponge* and a pair of small *bulldog forceps* were found. The *Australian Medical Journal* (No. 187) reproduces the report of the Hospital Committee, and gives a long account of the inquest held on the exhumed body of the patient.

The Development of Color in Flowers.

In the journal of the Scottish Meteorological Society, Mr. Buchan has given some interesting information with reference to the relation which the colors of flowers have to the date of flowering. He shows that "the *blues* are, on the average, considerably the earliest in flower; then follow in order the *whites* and the *purples*, and lastly, the *yellows* and *reds*. It follows that the plants included in the British Flora clearly tend to arrange themselves, as regards the dates of flowering, in the colors of the

spectrum, the average earliest being those which are nearest the part of the spectrum where the actinic rays are at the maximum."

Personal.

—Dr. Le Moine, the Pennsylvania cremationist, is determined that all his children shall follow his example, and be burned. To make sure of this result, he has made a provision in his will, that all the devises shall agree to be burned, before getting their legacies.

The degree of Doctor of Philosophy was conferred upon the following Doctors of Medicine at the commencement of the University of Pennsylvania, June 28th, 1877: Francis Dercum, Charles K. Ladd, Rev. Stephen Townsend, William Deats, C. E. Slocum, J. M. Anders, Herman Haupt, C. C. Vanderbeek, Charles H. McIlwaine, Philip M. Schiedt and Andrew J. Parker.

QUERIES AND REPLIES.

Dr. D. N. McB.—Johnson's *Cyclopedia* is complete in 4 vols. Price, cloth, \$10.75. It is the best work of the kind we know.

Dr. R. P. D.—Asks for the experience of prescribers as to the best solvent for salicylic acid.

Old Sub.—Reports the kerosene treatment for falling hair to be worthless. Books on the hair are, Wilson, price \$1.25; and Godfrey, price \$1.50.

TO EDITOR MEDICAL AND SURGICAL REPORTER:—

DEAR SIR:—Are the following preparations, viz., "Tinctura Tonica," "Tinct. Digitalis Comp." "Tinct. Amarae Aromaticæ," prescribed by some of the eminent medical men of your city, and prepared especially by Taylor, known to the profession, or are they favorite prescriptions of a few individuals? I have been unable to find any history of them. A reply in the REPORTER will serve many of your readers. Respectfully,

M. S. Penna.

OBITUARY.

DR. FRANKLIN WEST.

On the 15th ultimo, in this city, Franklin West M. D., in the twenty-sixth year of his age.

The assistant demonstrators of anatomy of the Jefferson Medical College convened Tuesday, June 19th, with Dr. John V. Shoemaker in the chair. The following resolutions were unanimously adopted:—

Whereas, The Anatomical Staff of Jefferson Medical College have heard with sincere sorrow of the sudden death of Dr. Franklin West,

Resolved, That while submitting with reverence to the will of Divine Providence, we cherish with a deep feeling of regret the loss sustained by his death.

Resolved, That the Staff have vivid recollections of his personal worth as a demonstrator, as he was studious, ambitious, and in all respects devoted to the interests of his profession.

Resolutions of respect were also passed by the Medical Board of Charity Hospital.